

**ARKANSAS BOARD OF REGISTRATION
FOR
PROFESSIONAL ENGINEERS AND LAND SURVEYORS**

P.O. Box 3750
Little Rock, Arkansas 72203-3750
Telephone: (501) 682-2824 Fax: (501) 682-2827
623 Woodlane Ave
Little Rock, AR 72201-1009
www.arkansas.gov/pels

**CERTIFICATE OF AUTHORIZATION
APPLICATION FORM**

Board Use Only

Received: _____

Check: _____

COA No: _____

Origination Fee	\$150.00
Renewal Fee	\$ 50.00
Amended Application	No fee due.
Reinstatements please call the Board for the fee.	

This _____ (indicate whether original, amended, renewal or reinstatement) Application is hereby made, by the undersigned for authorization to offer Engineering and/or Surveying Services in the State of Arkansas as a:

☐ Corporation ☐ Firm ☐ Partnership ☐ LLC ☐ Professional Association

1. Name of business:

2. Address of principal place of business: Phone: () - Fax: () - E-mail:

3. Name and registration number of the Arkansas PE and or PS in charge of each Arkansas branch office:

4. If incorporated, State of original incorporation: _____ Date: _____

Please contact the Arkansas Secretary of State at (501)682-3409 for information regarding filing requirements.

Complete items a, b, c, and d if filing as a foreign (out-of-state) corporation.

a. Date of certification with Arkansas Sec. of State: _____

b. Filing No.: _____

c. Service agent: _____

d. Address of service agent: _____

5. Board of Directors (*List all*):

Name of each Director	Title	Address	PE and/or PS Reg. No.	State

6. If firm or corporation, list below all officers:

Name of each officer	Title	Address	PE and/or PS Reg. No.	State

(This list must include one currently registered Professional Engineer and/or Professional Surveyor who has been designated by the firm or corporation as a Principal Engineer and/or Surveyor acting on behalf of the firm or corporation. The Board considers a Principal Engineer and/or Surveyor as the senior technical person who is a registered Professional Engineer and/or Surveyor and who makes significant technical and/or contractual judgments on behalf of the firm which would affect the firm's professional reputation and liability.)

7. If partnership, list below all partners:

Name of each Partner	Title	Address	PE and/or PS Reg. No.	State

8. List all employees who are currently registered and in good standing as Professional Engineers and/or Professional Surveyor in the State of Arkansas and who shall be in responsible charge of the practice of engineering/and or surveying in this State by said corporation, partnership or firm.

Name of each Arkansas PE and/or PS	Title	Address	Arkansas PE and/or PS No.	Expires

9. As the Arkansas Professional Engineer and/or Professional Surveyor acting on behalf of the firm, corporation, or partnership, I certify by my signature, that the information contained in 8 above is correct

(Note – this application cannot be processed until the AR PE and/or PS signing this document is registered or has renewed for the year for which this certificate shall apply).

Signature of Arkansas Professional Engineer
and/or Professional Surveyor

AR PE and/or PS Reg. No.

10. I, as an Officer and/or Partner certify by my signature, that the information contained in this form is correct.

Signature of Partner and/or Principal